



## 2022 MEMBERSHIP FORM

(PLEASE PRINT)

<b>*Name</b>		<b>*Primary Phone</b>	
<b>*Address</b>		<b>Alternate Phone</b>	
<b>*City</b>	<b>State</b>	<b>*Zip</b>	<b>** Email Address</b>
<b>Special interests?</b>	<b>Skills you'd like to share?</b>		<b>Birthday (month-day)</b>

\*Required

\*\*SRWF sends out monthly newsletters & occasional announcement by e-mail. You can help reduce club costs & still stay in touch with important happenings by providing us with your email.

**Name of person who invited you to join** \_\_\_\_\_

### **I WANT TO VOLUNTEER!**

(Choose All your Interests)

<input type="checkbox"/>	<b>CARING FOR AMERICA</b> Life skills for women/girls
<input type="checkbox"/>	<b>COMMUNICATIONS</b> Bulletin Editor/Publicity/Internet Updates/Blasts
<input type="checkbox"/>	<b>EDUCATION:</b> NRFW Literacy Program/Scholarships
<input type="checkbox"/>	<b>LEGISLATION:</b> National, State & Local
<input type="checkbox"/>	<b>ELECTIONS:</b> GOTV; Precinct Walking/Voter Registration
<input type="checkbox"/>	<b>MEMBERSHIP OUTREACH</b> Satellite Clubs, Organizer/Virtual Club organizer
<input type="checkbox"/>	<b>SPECIAL EVENTS</b> Christmas Event: Whistle Stop; Celebrate Membership
<input type="checkbox"/>	<b>COMMITTEE CHAIR</b> Americanism; Awards; Birthdays; Bulletin Circulation; Central Committee Liaison, Chaplain. Historian; Hospitality; Reservations

### **I WANT TO JOIN!**

(Select One)

<input type="checkbox"/>	<b>NEW MEMBER - \$40</b> I am registered to vote as a Republican woman over 18-years-old.
<input type="checkbox"/>	<b>RENEWING MEMBER - \$40</b> I paid SRWF dues in 2021
<input type="checkbox"/>	<b>AFFILIATE MEMBER - \$30</b> I am a male but want to support and be involved in SRWF.
<input type="checkbox"/>	<b>ASSOCIATE - \$15</b> I belong to another Federated Club _ Name _____ & want to meet with SRWF.
<input type="checkbox"/>	<b>INTERNS AND STUDENTS - \$27</b> I am 18 years and younger and want to be involved in SRWF.

**Membership Total**

**I want to Donate to help  
SRWF in their Mission**

**Total Due**

**Mail form and payment to:**

SRWF  
PO Box 896  
Citrus Heights, CA 95611  
Phone: 916-838-9980  
Email: [sacramentorwf@gmail.com](mailto:sacramentorwf@gmail.com)

**OFFICE USE ONLY**

Check #	
Amount	
PCR Rpt. Mo	
Date	